

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Sm		9/28/00
O.I.P.E. CLASSIFIER		21	10/5/00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Final	Original	Date
1	✓	1/2/00	9/10/00
2	✓	"	"
3	✓	"	"
4	✓	"	"
5	✓	"	"
6	✓	"	"
7	✓	"	"
8	✓	"	"
9	✓	"	"
10	✓	"	"
11	✓	"	"
12	✓	"	"
13	✓	"	"
14	✓	"	"
15	✓	"	"
16	0	"	"
17	0	"	"
18	0	"	"
19	0	"	"
20	0	"	"
21	0	"	"
22	0	"	"
23	✓	"	"
24	✓	"	"
25	✓	"	"
26	✓	"	"
27	✓	"	"
28	✓	"	"
29	✓	"	"
30	✓	"	"
31	0	"	"
32	0	"	"
33	0	"	"
34	0	"	"
35	0	"	"
36	0	"	"
37	✓	"	"
38	✓	"	"
39	✓	"	"
40	✓	"	"
41	0	"	"
42	0	"	"
43	0	"	"
44	0	"	"
45	0	"	"
46	0	"	"
47	0	"	"
48	0	"	"
49	0	"	"
50	0	"	"

Claim	Final	Original	Date
51	✓	1/2/00	9/10/00
52	✓	"	"
53	✓	"	"
54	✓	"	"
55	✓	"	"
56	✓	"	"
57	✓	"	"
58	✓	"	"
59	✓	"	"
60	✓	"	"
61	✓	"	"
62	✓	"	"
63	✓	"	"
64	✓	"	"
65	0	"	"
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67	0	"	"
68	0	"	"
69	0	"	"
70	0	"	"
71	0	"	"
72	0	"	"
73	0	"	"
74	0	"	"
75	0	"	"
76	✓	"	"
77	0	"	"
78	0	"	"
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Claim	Final	Original	Date
101		"	"
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145		"	"
146		"	"
147		"	"
148		"	"
149		"	"
150		"	"

BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

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